PTO/SB/22 (12-04)
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PETATO		TENSION OF TIME UND	Docket Number (Optional)			
APPAN	N FOR EX	FY 2005	Booker Humber (Option	iai)		
(Fe	es pursuant to	the Consolidated Appropriations	Act, 2005 (H.R. 4818).)		·	
Application	n Number	10/709,584	Filed 5/15/2004	·		
For S	SYSTEM F	OR DRYING EQUIPMEN	Т			
Art Unit	3742			Examiner Pelham	1	
This is a re application		r the provisions of 37 CFR 1	.136(a) to extend the period	d for filing a reply in the	e above identified	
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):						
	_		<u>Fee</u>	Small Entity Fee		
	One mor	nth (37 CFR 1.17(a)(1))	\$120	\$60	\$	
×] Two mor	nths (37 CFR 1.17(a)(2))	\$450	\$225	\$ 225	
	Three me	onths (37 CFR 1.17(a)(3))	\$1020	\$510	\$	
	Four mo	nths (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
	Five mor	nths (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27.						
A che	eck in the a	mount of the fee is enclos	sed.			
Payment by credit card. Form PTO-2038 is attached.						
The [Director has	s already been authorized	to charge fees in this ap	oplication to a Depos	sit Account.	
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to						
•	sit Account	•		•	e copy of this sheet.	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
I am the	ap	oplicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).						
attorney or agent of record. Registration Number <u>32668</u>						
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34						
		In I Wells	10/	18/05		
		Signature	/ Date			
G	lenn L. We		303 816 4893			
		Typed or printed name	Telepho	one Number		
	tures of all the in equired, see bel	nventors or assignees of record of th low.	e entire interest or their representa	tive(s) are required. Submit	multiple forms if more than on	
Total of forms are submitted.						

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

OCT 2 0 2005 (m)				IIS Patent			PTO/SB/17 (12-04v2 07/31/2006. OMB 0651-003 PARTMENT OF COMMERC	
Under the Panel Work Redu	oction Act of 199	5 no persons are requ	ired to re	espond to a collection	n of informa	ation unless it displays	a valid OMB control number	
Effective on 12/08/2004. Effective on 12/08/2004. Consolidated Appropriations Act. 2005 (H.R. 4818).				Complete if Known				
FEE TRANSMITTAL			Application Num	nber 1	10/709584			
			Filing Date	5	5/15/2004			
For FY 2005				First Named Inv	entor F	Petkov		
Applicant claims sm	Examiner Name) F	Pelham					
				Art Unit	3	3742		
TOTAL AMOUNT OF PAYMENT (\$)				Attorney Docket	No.			
METHOD OF PAYME	NT (check a	ll that apply)						
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION				· · · · · · · · · · · · · · · · · · ·				
1. BASIC FILING, SEA	FILING			CH FEES Small Entity	EXAMI	NATION FEES Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)		Fee (\$		Fees Paid (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
Fee DescriptionFee (\$)Each claim over 20 (including Reissues)50Each independent claim over 3 (including Reissues)200Multiple dependent claims360							Small Entity Fee (\$) 25 100 180 pendent Claims	
- 20 or HP = HP = highest number of tot Indep. Claims 5 - 3 or HP = HP = highest number of ind 3. APPLICATION SIZE If the specification an listings under 37 (sheets or fraction Total Sheets - 100 = 4. OTHER FEE(S)	tal claims paid for Extra Claim 2 ependent claim FFE d drawings of CFR 1.52(e) thereof. See Extra Shee	or, if greater than 20. ms Fee (\$) x 100 s paid for, if greater than exceed 100 sheets that the application is 35 U.S.C. 41(a)(Fee in 3. of papsize fee 1)(G) a	Paid (\$) 200 Der (excluding ele due is \$250 (\$)	125 for s 5(s). r fraction	Fee (\$) ally filed sequence and entity) for e	Fee Paid (\$) ce or computer ach additional 50 Fee Paid (\$) =	
Non-English Specif Other (e.g., late fili				liscount)			Fees Paid (\$)	

SUBMITTED BY			
Signature		, , , , , , ,	3030 V893
Name (Print/Type)	Glenn Webb	Date	0/18/05

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